

INDIVIDUAL ATTORNEY VOLUNTEER CARD  
U.S. DISTRICT COURT - EASTERN DISTRICT OF WISCONSIN

Name: \_\_\_\_\_ Date \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Years in Practice: \_\_\_\_\_

Preference for:      ☐ Social Security      ☐ § 1983      ☐ Title VII

Language:      ☐ Spanish      ☐ Other: \_\_\_\_\_